

☐ Check if this an amended filing

06/24

1. Debtor's name **Kame Turtle, LLC**

**3. Debtor's federal Employer Identification Number (EIN)** **82-2372728**

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
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Number, Street, City, State &amp; ZIP Code

Clark  
County

P.O. Box, Number, Street, City, State &amp; ZIP Code

**Location of principal assets, if different from principal place of business**

**3500 S. Las Vegas Blvd. Las Vegas, NV 89109**  
Number, Street, City, State & ZIP Code

**5. Debtor's website (URL)**      **<https://kappatoys.com>**

6. **Type of debtor**

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor **Kame Turtle, LLC**  
Name

Case number (if known)

**7. Describe debtor's business** A. *Check one:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. *Check all that apply*

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**4511****8. Under which chapter of the Bankruptcy Code is the debtor filing?** *Check one:*☒ Chapter 7☐ Chapter 9☐ Chapter 11. *Check all that apply:*

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 4/01/25 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District \_\_\_\_\_

When \_\_\_\_\_

Case number \_\_\_\_\_

District \_\_\_\_\_

When \_\_\_\_\_

Case number \_\_\_\_\_

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**☐ No☒ Yes.

Debtor **Kame Turtle, LLC** Case number (if known) \_\_\_\_\_  
NameList all cases. If more than 1,  
attach a separate listDebtor **See Attachment**

District \_\_\_\_\_

When \_\_\_\_\_

Relationship \_\_\_\_\_

Case number, if known \_\_\_\_\_

**11. Why is the case filed in this district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**☒ No☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? \_\_\_\_\_

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other \_\_\_\_\_**Where is the property?** \_\_\_\_\_

Number, Street, City, State &amp; ZIP Code

**Is the property insured?**☐ No☐ Yes.

Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

**Statistical and administrative information****13. Debtor's estimation of available funds**

Check one:

☐ Funds will be available for distribution to unsecured creditors.☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.**14. Estimated number of creditors**☐ 1-49☒ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☒ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Kame Turtle, LLC**  
Name

Case number (if known)

**Request for Relief, Declaration, and Signatures****WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 17, 2025**  
MM / DD / YYYY**X /s/ Elizabeth Newsome**

Signature of authorized representative of debtor

**Elizabeth Newsome**

Printed name

Title **Managing Member****18. Signature of attorney****X /s/ Zachariah Larson**

Signature of attorney for debtor

Date **January 17, 2025**

MM / DD / YYYY

**Zachariah Larson 7787**

Printed name

**Larson & Zirzow, LLC**

Firm name

**850 E. Bonneville Ave.  
Las Vegas, NV 89101**

Number, Street, City, State &amp; ZIP Code

Contact phone **702-382-1170**Email address **zlarson@lzlawnv.com****7787 NV**

Bar number and State

Debtor **Kame Turtle, LLC** Case number (if known) \_\_\_\_\_  
 Name

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

DISTRICT OF NEVADA

Case number (if known) \_\_\_\_\_ Chapter **7**

☐ Check if this an amended filing

**FORM 201. VOLUNTARY PETITION**

**Pending Bankruptcy Cases Attachment**

Debtor	<b>Mini Turtle LLC dba Kappa Toys</b>	Relationship to you	<b>Affiliate</b>
District	<b>Nevada</b>	When	<b>1/17/25</b>
Case number, if known			
Debtor	<b>Texas Kame LLC dba Kappa Toys</b>	Relationship to you	<b>Affiliate</b>
District	<b>Nevada</b>	When	<b>1/17/25</b>
Case number, if known			
Debtor	<b>Toy Turtle, LLC</b>	Relationship to you	<b>Affiliate</b>
District	<b>Nevada</b>	When	<b>1/17/25</b>
Case number, if known			

**UNANIMOUS WRITTEN CONSENT OF THE MEMBERS OF  
KAME TURTLE LLC, a Nevada limited liability company**

The undersigned, being all the members (collectively, the “Members”) of KAME TURTLE LLC, a Nevada limited liability company (the “Company”), hereby approve the following resolutions as of January 7, 2025:

RESOLVED that in the judgment of the Members, and upon the advice of bankruptcy counsel to the Company, it is desirable and in the best interests of the Company and its creditors that a voluntary petition for relief be filed under chapter 7 of title 11 of the United States Code (the “Bankruptcy Code”), and such filing is authorized hereby, and the Company shall initiate a bankruptcy case and proceedings;

RESOLVED that ELIZABETH NEWSOME (the “Authorized Person”), shall be authorized, empowered and directed, in the name and on behalf of the Company, to execute and verify a bankruptcy petition, schedules, statements, and any amendments thereto under chapter 7 of the Bankruptcy Code and to cause the same to be filed in the U.S. Bankruptcy Court for the District of Nevada at such time as such Authorized Person executing the same shall determine;

RESOLVED that the Authorized Person shall be designated as the responsible person in the Company’s chapter 7 bankruptcy case pursuant to Fed. R. Bankr. P. 9001(5), and is authorized and directed to appear in all bankruptcy proceedings on behalf of the Company, and to otherwise do and perform all acts necessary on behalf of the Company in connection with such case;

RESOLVED that the law firm of LARSON & ZIRZOW, LLC is engaged and shall continue its engagement as bankruptcy attorneys for the Company in the chapter 7 case, and its legal representation agreement is approved;


RESOLVED that the Authorized Person is, authorized, empowered and directed, in the name and on behalf of the Company, to execute and file all papers, and to take and perform any and all further acts and deeds which he or she deems appropriate to commence the chapter 7 case and proceed therewith to conclusion;

RESOLVED that any and all past actions heretofore taken by the Authorized Person of the Company in the name and on behalf of the Company in furtherance of any or all of the preceding resolutions with respect to the preparation and commencement of the chapter 7 case be, and the same hereby are, ratified, confirmed, and approved; and

[Rest of page intentionally left blank]

IN WITNESS WHEREOF, the undersigned, being all of the Managers of the Company, by execution hereof, hereby approve this Written Consent as of the date above.

KAME TURTLE LLC,  
a Nevada limited liability company,

By:   
Elizabeth Newsome, Manager

By:   
Trevor Yopp, Manager

By:   
William Beam, Manager

**Fill in this information to identify the case:**Debtor name Kame Turtle, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 17, 2025**X /s/ Elizabeth Newsome**

Signature of individual signing on behalf of debtor

**Elizabeth Newsome**

Printed name

**Managing Member**

Position or relationship to debtor



**Fill in this information to identify the case:**Debtor name **Kame Turtle, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **123,818.22****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **123,818.22****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **371,760.99****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **15,925.60****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **7,666,691.67****4. Total liabilities** .....  
Lines 2 + 3a + 3b\$ **8,054,378.26**

**Fill in this information to identify the case:**Debtor name Kame Turtle, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. ChaseChecking5221\$11,266.513.2. ChaseSavings8677\$1.71**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$11,268.22****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. Security deposit [The Forum Shops]\$5,000.00

Debtor **Kame Turtle, LLC**  
Name

Case number (If known) \_\_\_\_\_

7.2. **Security Deposit [Pozemki, LLC]** **\$5,000.00**8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**  
Description, including name of holder of prepayment8.1. **Prepaid Rent for Lease of premises as the The Forum Shops** **\$30,000.00**9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$40,000.00****Part 3: Accounts receivable**10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

11. **Accounts receivable**

11b. Over 90 days old:	<u>347,576.17</u>	-	<u>347,576.17</u>	=....	<u>\$0.00</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>164,682.61</u>	-	<u>164,682.61</u>	=....	<u>\$0.00</u>
	face amount		doubtful or uncollectible accounts		

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$0.00****Part 4: Investments**13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.  
☒ Yes Fill in the information below.

	<b>General description</b>	<b>Date of the last physical inventory</b>	<b>Net book value of debtor's interest (Where available)</b>	<b>Valuation method used for current value</b>	<b>Current value of debtor's interest</b>
19.	<b>Raw materials</b>				
20.	<b>Work in progress</b>				
21.	<b>Finished goods, including goods held for resale</b>				
	<u>Retail Inventory</u>	<u>12/26/2024</u>	<u>Unknown</u>	<u>Appraisal</u>	<u>\$51,700.00</u>

22. **Other inventory or supplies**

Debtor **Kame Turtle, LLC**  
Name

Case number (If known) \_\_\_\_\_

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

**\$51,700.00**24. **Is any of the property listed in Part 5 perishable?**

- ☒ No  
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No  
☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☐ No  
☒ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	<b>Office furniture</b> <u>Office Furniture</u>	<u>Unknown</u>	<u>Appraisal</u>	<u>\$2,610.00</u>
40.	<b>Office fixtures</b> <u>Various display racks, shelving, cabinets, glass cubes and bins, ladders</u>	<u>Unknown</u>	<u>Appraisal</u>	<u>\$5,170.00</u>
41.	<b>Office equipment, including all computer equipment and communication systems equipment and software</b> <u>Computer and communication systems equipment</u>	<u>Unknown</u>	<u>Appraisal</u>	<u>\$570.00</u>

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

**\$8,350.00**44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No  
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

Debtor **Kame Turtle, LLC**  
Name

Case number (If known) \_\_\_\_\_

- ☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. <b>Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
47.1. <b>2018 Chrysler Ram ProMaster LT (to be surrendered)</b>	<b>Unknown</b>	<b>Kelley Blue Book</b>	<b>\$12,500.00</b>

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*49. **Aircraft and accessories**50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$12,500.00**52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No  
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. <b>Lease of a portion of the Premises located at 3420 Polaris Ave., Las Vegas, Nevada</b>	<b>Lessee</b>	<b>\$0.00</b>		<b>\$0.00</b>

Debtor **Kame Turtle, LLC** Case number (If known) \_\_\_\_\_  
Name

55.2. **Temporary Space Lease Agreement located at Area 15** **Lessee** **\$0.00** **\$0.00**

55.3. **Lease Agreement for Premises located at The Forum Shops at Caesars, Unit 0S27C** **Lessee** **\$0.00** **\$0.00**

55.4. **Lease of Premises located in the Mall of America, Bloomington, Minnesota, space S238 (guarantor)** **Lessee** **\$0.00** **\$0.00**

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
 Copy the total to line 88.

**\$0.00**

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No  
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	<b>Patents, copyrights, trademarks, and trade secrets</b> <b>Trademark US Serial #xxxx2215</b>	<b>Unknown</b>		<b>Unknown</b>
61.	<b>Internet domain names and websites</b> <b>Kappatoys.com</b>	<b>Unknown</b>		<b>Unknown</b>
	<b>Vegastoy.com</b>	<b>Unknown</b>		<b>Unknown</b>
62.	<b>Licenses, franchises, and royalties</b>			
63.	<b>Customer lists, mailing lists, or other compilations</b> <b>Customer email list</b>	<b>\$0.00</b>		<b>\$0.00</b>

64. **Other intangibles, or intellectual property**

Debtor **Kame Turtle, LLC**  
Name

Case number (If known) \_\_\_\_\_

65. **Goodwill**66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

**\$0.00**67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.☐ Yes Fill in the information below.

Debtor **Kame Turtle, LLC**  
Name

Case number (If known) \_\_\_\_\_

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$11,268.22</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$40,000.00</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$0.00</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$51,700.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$8,350.00</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$12,500.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$0.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>+</b> <b>\$0.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$123,818.22</b>	<b>+ 91b. \$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$123,818.22</b>



**Fill in this information to identify the case:**Debtor name Kame Turtle, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	<b>JPMorgan Chase Bank, N.A.</b> <small>Creditor's Name</small> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>P.O. Box 6026, IL1-1145</b> <b>Chicago, IL 60680-6026</b> <small>Creditor's mailing address</small>  <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b> <b>6/28/2023</b> <b>Last 4 digits of account number</b> <b>6005</b> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>All deposits, inventory, chattel paper, accounts, equipment and general intangibles.</b>  Describe the lien <b>UCC-1 2023337467-5</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$201,804.47</b>	<b>\$0.00</b>

2.2	<b>Stellantis Financial Services</b> <small>Creditor's Name</small> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>PO Box 205749</b> <b>Dallas, TX 75320-5749</b> <small>Creditor's mailing address</small>  <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b> <b>8/14/2023</b>	Describe debtor's property that is subject to a lien <b>2018 Chrysler Ram ProMaster LT (to be surrendered)</b>  Describe the lien <b>Automobile Loan - Vehicle being surrendered</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	<b>\$19,956.52</b>	<b>\$12,500.00</b>
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Debtor **Kame Turtle, LLC**

Case number (if known)

Name

Last 4 digits of account number

**0001**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

2.3

**U.S. Small Business Administration**

Creditor's Name

**Attn: Gil Hopenstand, Esq.  
312 N. Spring St., Fifth  
Floor  
Los Angeles, CA 90012**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**5.27.2020**

Last 4 digits of account number

**7800**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**All tangible and intangible property.****\$150,000.00****Unknown**

Describe the lien

**UCC-1 2020106413-2**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$371,760.99****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

**JPMorgan Chase Bank, N.A.  
Attn: Bankruptcy Dept/Managing Agent  
3770 Howard Hughes Parkway, #240  
Las Vegas, NV 89169**Line **2.1****U.S. Small Business Administration  
Attn: Bankruptcy Dept/Managing Agent  
10737 Gateway West, #300  
El Paso, TX 79935**Line **2.3****4132****U.S. Small Business Administration  
Nevada District Office  
Attn: Joseph Amato, Director  
300 South 4th St., Suite 400  
Las Vegas, NV 89101**Line **2.3****4132**

**Fill in this information to identify the case:**Debtor name **Kame Turtle, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Iana Sztaimberg</b> <b>406 Brooks Ave.</b> <b>Schertz, TX 78154</b>  Date or dates debt was incurred _____  Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <b>Severance pay</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,425.60</b> <b>\$9,425.60</b>
2.2	Priority creditor's name and mailing address <b>Nicole Wong</b> <b>207 Aero Avenue</b> <b>Schertz, TX 78154</b>  Date or dates debt was incurred _____  Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <b>Severance pay</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,500.00</b> <b>\$6,500.00</b>

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor Name	Case number (if known)
<b>Kame Turtle, LLC</b> Name 3.1 Nonpriority creditor's name and mailing address <b>Aliquantum International Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>2009 S. Parco Ave.</b> <b>Ontario, CA 91761</b> Date(s) debt was incurred <u>12/15/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$21,857.48</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2 Nonpriority creditor's name and mailing address <b>Archie McPhee Wholesale</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>10915 47th Ave W</b> <b>Mukilteo, WA 98275</b> Date(s) debt was incurred <u>09/19/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$3,480.40</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unpaid rent</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3 Nonpriority creditor's name and mailing address <b>AREA15 Las Vegas, LLC</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>3222 West Desert Inn Road</b> <b>Las Vegas, NV 89102</b> Date(s) debt was incurred <u>12/11/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$9,806.92</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Temporary Space Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4 Nonpriority creditor's name and mailing address <b>Aurora World, Inc</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>8820 Mercury Lane</b> <b>Pico Rivera, CA 90660</b> Date(s) debt was incurred <u>12/18/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$1,024.32</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5 Nonpriority creditor's name and mailing address <b>Bandai Namco Toys &amp; Collectibles</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>23 Odyssey</b> <b>Irvine, CA 92618</b> Date(s) debt was incurred <u>08/01/24</u> Last 4 digits of account number <u>1040</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$17,086.25</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6 Nonpriority creditor's name and mailing address <b>BONGIOVI Law Firm</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>2620 Regatta Drive</b> <b>Ste 102</b> <b>Las Vegas, NV 89128</b> Date(s) debt was incurred <u>07/22/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$2,199.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7 Nonpriority creditor's name and mailing address <b>Brave Toys Pty Ltd</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>89- 16 Jamaica Ave</b> <b>Woodhaven, NY 11421</b> Date(s) debt was incurred <u>12/15/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$1,981.10</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Kame Turtle, LLC</b> Name	Case number (if known)
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3.8	Nonpriority creditor's name and mailing address <b>Capital One</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>P.O. Box 60519</b> <b>City of Industry, CA 91716-0519</b> Date(s) debt was incurred <u>2024</u> Last 4 digits of account number <u>3565</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Charge account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,322.27</b>
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3.9	Nonpriority creditor's name and mailing address <b>Cardmember Service</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>P.O. Box 6294</b> <b>Carol Stream, IL 60197-6294</b> Date(s) debt was incurred <u>2024</u> Last 4 digits of account number <u>7642</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Charge account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,721.04</b>
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3.10	Nonpriority creditor's name and mailing address <b>Cardmember Service</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>P.O. Box 6294</b> <b>Carol Stream, IL 60197-6294</b> Date(s) debt was incurred <u>2024</u> Last 4 digits of account number <u>1690</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Charge account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$39,288.10</b>
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3.11	Nonpriority creditor's name and mailing address <b>Cardmember Service</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>P.O. Box 6294</b> <b>Carol Stream, IL 60197-6294</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>1708</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Charge account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.12	Nonpriority creditor's name and mailing address <b>Carrera Revell Of Americas Inc.</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>197 New Jersey 18</b> <b>East Brunswick, NJ 08816</b> Date(s) debt was incurred <u>12/28/24</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,524.42</b>
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3.13	Nonpriority creditor's name and mailing address <b>CenturyLink</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>100 Centurytel Drive</b> <b>Monroe, LA 71201</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.14	Nonpriority creditor's name and mailing address <b>Chooseco LLC</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>340 Mad River Park</b> <b>Waitsfield, VT 05673</b> Date(s) debt was incurred <u>12/01/24</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$723.10</b>
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Debtor	<b>Kame Turtle, LLC</b> Name _____	Case number (if known) _____
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3.15	<b>Nonpriority creditor's name and mailing address</b> <b>CliftonLarsonAllen LLP</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>P.O. Box 776376</b> <b>Chicago, IL 60677-6376</b> Date(s) debt was incurred <u>06/25/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,689.95</b>
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3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Douglas Co, Inc</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>69 Krif Road</b> <b>Box D</b> <b>Keene, NH 03431</b> Date(s) debt was incurred <u>12/15/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,268.00</b>
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3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Dreams USA Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>2 Charles St. Ste. 3B</b> <b>Providence, RI 02904</b> Date(s) debt was incurred <u>12/28/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35,800.88</b>
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3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Duncan Toys Company</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>Po Box 851692</b> <b>Minneapolis, MN 55485</b> Date(s) debt was incurred <u>12/15/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$620.67</b>
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3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Elizabeth Newsome</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>1127 South 6th Street</b> <b>Las Vegas, NV 89104</b> Date(s) debt was incurred <u>12/24/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Unpaid wages: 1/24-6/24</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$63,738.84</b>
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3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Elope Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>2080 Lookout Drive</b> <b>North Mankato, MN 56003</b> Date(s) debt was incurred <u>11/11/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,967.40</b>
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3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Enesco, LLC</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>500 Park Boulevard</b> <b>Ste 1300</b> <b>Itasca, IL 60143</b> Date(s) debt was incurred <u>12/18/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,518.26</b>
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Debtor	<b>Kame Turtle, LLC</b> Name _____	Case number (if known) _____
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3.22	Nonpriority creditor's name and mailing address <b>Epoch Everlasting Play LLC</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>330 Changebridge Road Suite 101</b> <b>Montville, NJ 07058</b>  Date(s) debt was incurred <u>12/12/24</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$15,751.35</b></u>
<hr/>			
3.23	Nonpriority creditor's name and mailing address <b>Fascinations, Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>19224 Des Moines Memorial Drive</b> <b>Suite 100</b> <b>Seattle, WA 98148</b>  Date(s) debt was incurred <u>12/18/24</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$1,182.72</b></u>
<hr/>			
3.24	Nonpriority creditor's name and mailing address <b>Forum Shops, LLC</b> <b>The Forum Shops at Caesars III</b> <b>Attn: Management Office</b> <b>3500 Las Vegas Blvd. So.</b> <b>Las Vegas, NV 89109</b>  Date(s) debt was incurred <u>07/22/24</u> Last 4 digits of account number <u>6614</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>Remaining lease obligations with The Forum Shops at Caesars</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$381,612.50</b></u>
<hr/>			
3.25	Nonpriority creditor's name and mailing address <b>Funko, LLC</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>PO Box 677876</b> <b>Dallas, TX 75267</b>  Date(s) debt was incurred <u>11/27/24</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$612.98</b></u>
<hr/>			
3.26	Nonpriority creditor's name and mailing address <b>Guardian Life Insurance Company</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>7 Hanover Square</b> <b>New York, NY 10004</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>Unknown</b></u>
<hr/>			
3.27	Nonpriority creditor's name and mailing address <b>Hachette Book Group</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>PO Box 8828</b> <b>JFK Station</b> <b>Boston, MA 02114-8828</b>  Date(s) debt was incurred <u>10/26/24</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u><b>\$5,064.95</b></u>



Debtor	<b>Kame Turtle, LLC</b> Name _____	Case number (if known) _____
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3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Heebie Jeebies LLC</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>2810 N Church St</b> <b>PMB 73405</b> <b>Wilmington, DE 19802</b> Date(s) debt was incurred <u>08/28/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$599.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.29	<b>Nonpriority creditor's name and mailing address</b> <b>HG Galleria, LLC</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>2088 Washington Street</b> <b>Indianapolis, IN 46204-3438</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$2,149,170.00</b></span> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Guarantor on remainder of Texas Kame LLC's tenant lease at Houston Galleria Mall</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.30	<b>Nonpriority creditor's name and mailing address</b> <b>House of Marbles</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>PO Box 5814</b> <b>126 Stryker Lane, Building 24</b> <b>Hillsborough, NJ 08844</b> Date(s) debt was incurred <u>12/18/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$825.50</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.31	<b>Nonpriority creditor's name and mailing address</b> <b>Interactive Accountants LLC</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>8180 Northwest 36th Street</b> <b>Suite 327</b> <b>Doral, FL 33166</b> Date(s) debt was incurred <u>12/19/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$7,384.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.32	<b>Nonpriority creditor's name and mailing address</b> <b>Lightspeed Hardware</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>450 Park Ave. South</b> <b>New York City, NY 10016</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,044.69</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.33	<b>Nonpriority creditor's name and mailing address</b> <b>Little Buddy LLC</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>7422 Orangewood Avenue</b> <b>Garden Grove, CA 92841</b> Date(s) debt was incurred <u>12/28/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$10,419.50</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Kame Turtle, LLC</b> Name	Case number (if known)
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3.34	<b>Nonpriority creditor's name and mailing address</b> <b>Loomis</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>Dept 0757</b> <b>P.O. Box 120001</b> <b>Dallas, TX 75312</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,939.02</b>
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3.35	<b>Nonpriority creditor's name and mailing address</b> <b>M Health Fairview</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>1700 University Ave. W</b> <b>Saint Paul, MN 55104-3791</b> Date(s) debt was incurred <u>12/2/2024</u> Last 4 digits of account number <u>0457</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,629.00</b>
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3.36	<b>Nonpriority creditor's name and mailing address</b> <b>Marsello, Inc.</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>4 Bond St.</b> <b>Wellington, 9059</b> <b>New Zealand</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.37	<b>Nonpriority creditor's name and mailing address</b> <b>Mesa Energy, Inc.</b> <b>dba EMCOR Services Nevada</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>6295 S. Peral Street, Ste. 1400</b> <b>Las Vegas, NV 89120</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.38	<b>Nonpriority creditor's name and mailing address</b> <b>MOAC Mall Holdings LLC</b> <b>Mall of America Management Office</b> <b>2131 Lindau Lane - Suite 500</b> <b>Minneapolis, MN 55425-2640</b> Date(s) debt was incurred <u>09/19/2023</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Guarantor on remainder of Mini Turtle LLC's tenant lease at Mall of America</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,606,769.39</b>
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3.39	<b>Nonpriority creditor's name and mailing address</b> <b>NV Energy</b> <b>Attn: Bankruptcy Dept. /Managing Agent</b> <b>PO Box 30086</b> <b>Reno, NV 89520</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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Debtor	<b>Kame Turtle, LLC</b> Name _____	Case number (if known) _____
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3.40	<b>Nonpriority creditor's name and mailing address</b> <b>Pozemki, LLC</b> <b>c/o Elisabeth and Frederic Apar</b> <b>9555 Hillwood Drive</b> <b>Las Vegas, NV 89134</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$71,104.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Remaining Lease obligation for 3420 Polaris Avenue, Las Vegas, NV 89102</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.41	<b>Nonpriority creditor's name and mailing address</b> <b>Redstone Foods Inc</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>1434 Patton Place, Suite 106</b> <b>Carrollton, TX 75007</b>  Date(s) debt was incurred <u>12/15/24</u> Last 4 digits of account number <u>2470</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$2,222.51</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.42	<b>Nonpriority creditor's name and mailing address</b> <b>Republic Services</b> <b>Attn: Bankruptcy Dept. / Managing Agent</b> <b>770 E. Sahara Ave.</b> <b>Las Vegas, NV 89104-2943</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>Unknown</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.43	<b>Nonpriority creditor's name and mailing address</b> <b>Rhode Island Novelty Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>350 Commerce Drive</b> <b>Fall River, MA 02720</b>  Date(s) debt was incurred <u>12/19/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$3,193.52</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.44	<b>Nonpriority creditor's name and mailing address</b> <b>Schylling Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>PO Box 941</b> <b>C/O Berkshire Bank</b> <b>Worcester, MA 01613-0941</b>  Date(s) debt was incurred <u>12/28/24</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$36,282.14</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.45	<b>Nonpriority creditor's name and mailing address</b> <b>Shopify</b> <b>Attn: Bankruptcy/Managing Member</b> <b>151 O'Connor St. Ground Floor</b> <b>Ottawa, ON K2P 2L8</b> <b>Canada</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>Unknown</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.46	<b>Nonpriority creditor's name and mailing address</b> <b>Sierra Health Insurance</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>P.O. Box 749542</b> <b>Los Angeles, CA 90074-9542</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>Unknown</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Name	Case number (if known)
3.47	<b>Kame Turtle, LLC</b> <b>Simon &amp; Schuster Inc</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>PO Box 70660</b> <b>Chicago, IL 60673-0660</b> Date(s) debt was incurred <u>12/15/24</u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Services</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$5,380.56</b>
3.48	<b>Soundtrack</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>800 5th Ave. N. Ste. 4100</b> <b>Seattle, WA 98109-3906</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Services</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Unknown</b>
3.49	<b>Sparkletts</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>200 Eagles Landing Blvd.</b> <b>Lakeland, FL 33810</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Services</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Unknown</b>
3.50	<b>Spin Master Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>300 International Drive, Suite 100</b> <b>Williamsville, NY 14221</b> Date(s) debt was incurred <u>12/26/24</u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Vendor</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$40,175.55</b>
3.51	<b>Squire Boone Village</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>PO BOX 711</b> <b>New Albany, IN 47151</b> Date(s) debt was incurred <u>10/26/24</u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Vendor</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$871.36</b>
3.52	<b>Stellantis Financial Services</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>3065 Akers Mill Rd., Ste. 700</b> <b>Atlanta, GA 30339</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>0001</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>Services</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Unknown</b>
3.53	<b>Synter Resource Group, LLC</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>PO Box 63247</b> <b>North Charleston, SC 29419-3247</b> Date(s) debt was incurred <u>4/20/2024</u> Last 4 digits of account number <u>2649</u>	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim: <u>UPS services</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$1,542.00</b>

Debtor Name	Case number (if known)
<b>Kame Turtle, LLC</b> Name 3.54 Nonpriority creditor's name and mailing address <b>Tedco Toys</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>498 South Washington Street</b> <b>Hagerstown, IN 47346</b> Date(s) debt was incurred <u>10/24/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$1,596.60</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.55 Nonpriority creditor's name and mailing address <b>The Hartford</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>3600 Wiseman Blvd.</b> <b>San Antonio, TX 78251</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>Unknown</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56 Nonpriority creditor's name and mailing address <b>tokidoki</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>5655 West Adams Blvd</b> <b>Los Angeles, CA 90016</b> Date(s) debt was incurred <u>12/28/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$6,350.30</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57 Nonpriority creditor's name and mailing address <b>Toysmith</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>3101 WEST VALLEY HWY EAST</b> <b>SUMNER, WA 98390</b> Date(s) debt was incurred <u>12/19/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$15,176.79</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58 Nonpriority creditor's name and mailing address <b>Trend Enterprises Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>Po Box 70870</b> <b>CM-9666</b> <b>Saint Paul, MN 55170-9666</b> Date(s) debt was incurred <u>11/11/24</u> Last 4 digits of account number <u>4923</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$888.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59 Nonpriority creditor's name and mailing address <b>Trevor Yopp</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>1127 South 6th Street</b> <b>Las Vegas, NV 89104</b> Date(s) debt was incurred <u>12/24/24</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$30,830.88</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unpaid wages: 1/24-6/24</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.60 Nonpriority creditor's name and mailing address <b>Vivint</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>62993 Collections Drive</b> <b>Chicago, IL 60693-0629</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>Unknown</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Kame Turtle, LLC</b> Name _____	Case number (if known) _____
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3.61	<b>Nonpriority creditor's name and mailing address</b> <b>Weactive Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>21151 S Western Ave Suite 276</b> <b>Torrance, CA 90501</b>  Date(s) debt was incurred <u>12/01/24</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20,400.00</b>
3.62	<b>Nonpriority creditor's name and mailing address</b> <b>Wheniwork.com</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>420 N. 5th St., Ste. 500</b> <b>Minneapolis, MN 55401</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.63	<b>Nonpriority creditor's name and mailing address</b> <b>Wild Republic</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>7711 E Pleasant Valley Rd</b> <b>Independence, OH 44131</b>  Date(s) debt was incurred <u>12/28/24</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,588.77</b>
3.64	<b>Nonpriority creditor's name and mailing address</b> <b>Winning Moves Games, Inc.</b> <b>Attn:Bankruptcy Dept/Managing Member</b> <b>75 Sylvan Street</b> <b>Suite C-104</b> <b>Danvers, MA 01923</b>  Date(s) debt was incurred <u>12/15/24</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,421.00</b>
3.65	<b>Nonpriority creditor's name and mailing address</b> <b>Worldpay Payment Resolution</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>P.O. Box 639726</b> <b>Cincinnati, OH 45263-9726</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,044.69</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Area 15 Las Vegas, LLC</b> <b>c/o Area 15 LV Mezz, LLC</b> <b>299 Park Avenue, 42nd Flr.</b> <b>New York, NY 10171</b>	Line <u>3.3</u>  <input type="checkbox"/> Not listed. Explain ____	—
4.2	<b>Forum Developers Limited Partnership</b> <b>c/o CT Corp. System, as Resident Agent</b> <b>701 S. Carson Street, Ste. 200</b> <b>Carson City, NV 89701</b>	Line <u>3.24</u>  <input type="checkbox"/> Not listed. Explain ____	—

Debtor	Name	Case number (if known)
	<b>Kame Turtle, LLC</b>	
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?
		Last 4 digits of account number, if any
4.3	<b>HG Galleria, LLC</b> <b>Attn: Bankruptcy Dept. / Managing Agent</b> <b>2088 Paysphere Circle</b> <b>Chicago, IL 60674</b>	Line <u>3.29</u> <input type="checkbox"/> Not listed. Explain _____
4.4	<b>Loomis</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>Dept. 0757</b> <b>P.O. Box 120757</b> <b>Dallas, TX 75312-0757</b>	Line <u>3.34</u> <input type="checkbox"/> Not listed. Explain _____
4.5	<b>MOAC Mall Holdings LLC</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>NW 5826</b> <b>P.O. Box 1450</b> <b>Minneapolis, MN 55485-5826</b>	Line <u>3.38</u> <input type="checkbox"/> Not listed. Explain _____
4.6	<b>Sierra Health</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>P.O. Box 18407</b> <b>Las Vegas, NV 89114-8407</b>	Line <u>3.46</u> <input type="checkbox"/> Not listed. Explain _____
4.7	<b>Simon Property Group</b> <b>Attn: Legal Collections</b> <b>225 West Washington Street</b> <b>Indianapolis, IN 46204-3438</b>	Line <u>3.24</u> <input type="checkbox"/> Not listed. Explain _____
4.8	<b>Simon Property Group</b> <b>Attn: Legal Collections</b> <b>225 West Washington Street</b> <b>Indianapolis, IN 46204-3438</b>	Line <u>3.29</u> <input type="checkbox"/> Not listed. Explain _____
4.9	<b>Simon Property Group, Inc.</b> <b>c/o The Corporation Trust Company</b> <b>Corporation Trust Center</b> <b>1209 Orange St.</b> <b>Wilmington, DE 19801</b>	Line <u>3.24</u> <input type="checkbox"/> Not listed. Explain _____
4.10	<b>Stellantis Financial Services</b> <b>Attn: Bankruptcy Dept/Managing Agent</b> <b>PO Box 205749</b> <b>Dallas, TX 75320-5749</b>	Line <u>3.52</u> <input type="checkbox"/> Not listed. Explain _____

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>15,925.60</u>
5b. +	\$ <u>7,666,691.67</u>
5c.	\$ <u>7,682,617.27</u>

**Fill in this information to identify the case:**Debtor name **Kame Turtle, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Temporary Space License Agreement**State the term remaining **4/30/2025**

List the contract number of any government contract \_\_\_\_\_

**Area 15 Las Vegas, LLC  
c/o Area 15 LV Mezz, LLC  
299 Park Avenue, 42nd Flr.  
New York, NY 10171**2.2. State what the contract or lease is for and the nature of the debtor's interest **Retail lease agreement**State the term remaining **1/31/2026**

List the contract number of any government contract \_\_\_\_\_

**Forum Shops, LLC  
The Forum Shops at Caesars III  
Attn: Management Office  
3500 Las Vegas Blvd. So.  
Las Vegas, NV 89109**2.3. State what the contract or lease is for and the nature of the debtor's interest **Guarantor on Texas Kame LLC's tenant lease at Houston Galleria Mall**State the term remaining **12/31/2029**

List the contract number of any government contract \_\_\_\_\_

**HG Galleria, LLC  
Attn: Bankruptcy Dept/Managing Agent  
2088 Washington Street  
Indianapolis, IN 46204-3438**2.4. State what the contract or lease is for and the nature of the debtor's interest **Employment/Severance Agreement dated 8/8/2023**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Ilana Sztaimberg  
406 Brooks Ave.  
Schertz, TX 78154**



Debtor 1 **Kame Turtle, LLC**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **Service agreement for HVAC Maintenance Program**

State the term remaining

List the contract number of any government contract

**Mesa Energy Systems Inc.  
Attn: Bankruptcy Dept/Managing Agent  
6295 S. Pearl Street, Ste. No. 1400  
Las Vegas, NV 89120**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Guarantor on Mini Turtle LLC's tenant lease at Mall of America**

State the term remaining **10/01/2033**

List the contract number of any government contract

**MOAC Mall Holdings LLC  
Mall of America Management Office  
2131 Lindau Lane - Suite 500  
Minneapolis, MN 55425-2640**

2.7. State what the contract or lease is for and the nature of the debtor's interest **Employment/Severance Agreement dated 8/1/2023.**

State the term remaining

List the contract number of any government contract

**Nicole Wong  
207 Aero Avenue  
Schertz, TX 78154**

2.8. State what the contract or lease is for and the nature of the debtor's interest **Lease agreement, as amended, for premises located at 3420 Polaris Avenue, Las Vegas, NV 89102**

State the term remaining **7/30/2026**

List the contract number of any government contract

**Pozemki, LLC  
c/o Elisabeth and Frederic Aparcar  
9555 Hillwood Drive  
Las Vegas, NV 89134**



**Fill in this information to identify the case:**Debtor name **Kame Turtle, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1 **Elizabeth Newsome** **1127 S. 6th St.  
Las Vegas, NV 89104**

**Cardmember Service**

☐ D \_\_\_\_\_  
☒ E/F **3.10**  
☐ G \_\_\_\_\_

2.2 **Elizabeth Newsome** **1127 S. 6th St.  
Las Vegas, NV 89104**

**Capital One**

☐ D \_\_\_\_\_  
☒ E/F **3.8**  
☐ G \_\_\_\_\_

2.3 **Elizabeth Newsome** **1127 S. 6th St.  
Las Vegas, NV 89104**

**Cardmember Service**

☐ D \_\_\_\_\_  
☒ E/F **3.9**  
☐ G \_\_\_\_\_

2.4 **Elizabeth Newsome** **1127 S. 6th St.  
Las Vegas, NV 89104**

**Cardmember Service**

☐ D \_\_\_\_\_  
☒ E/F **3.11**  
☐ G \_\_\_\_\_

2.5 **Elizabeth Newsome** **1127 S. 6th St.  
Las Vegas, NV 89104**

**JPMorgan Chase  
Bank, N.A.**

☒ D **2.1**  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

Debtor **Kame Turtle, LLC**

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	<b>Mini Turtle LLC</b>	3420 Polaris Ave. Las Vegas, NV 89102	<b>MOAC Mall Holdings LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.38</u> <input type="checkbox"/> G _____
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2.7	<b>Texas Kame LLC</b>	3420 Polaris Ave. Las Vegas, NV 89102	<b>HG Galleria, LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.29</u> <input type="checkbox"/> G _____
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2.8	<b>Trevor Yopp</b>	1127 S. 6th St. Las Vegas, NV 89104 Co-Debtor	<b>Stellantis Financial Services</b>	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.9	<b>Mini Turtle LLC</b>	3420 Polaris Ave. Las Vegas, NV 89102	<b>MOAC Mall Holdings LLC</b>	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.6</u>
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2.10	<b>Texas Kame LLC</b>	3420 Polaris Ave. Las Vegas, NV 89102 Guarantor	<b>HG Galleria, LLC</b>	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.3</u>
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**Fill in this information to identify the case:**Debtor name Kame Turtle, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

**For prior year:**  
From **1/01/2024** to **12/31/2024**

**Sources of revenue**  
Check all that apply

☒ Operating a business  
☐ Other \_\_\_\_\_

**Gross revenue**  
(before deductions and exclusions)

Unknown

**For year before that:**  
From **1/01/2023** to **12/31/2023**

☒ Operating a business  
☐ Other \_\_\_\_\_

\$2,569,336.00

**For the fiscal year:**  
From **1/01/2022** to **12/31/2022**

☒ Operating a business  
☐ Other \_\_\_\_\_

\$2,922,338.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue**

**Gross revenue from each source**  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.**Creditor's Name and Address****Dates****Total amount of value**

**Reasons for payment or transfer**  
*Check all that apply*

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

Debtor **Kame Turtle, LLC**

Case number (if known)

or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Trevor Yopp 1127 S. 6th St. Las Vegas, NV 89104 Member/Owner	3/20/2024	\$2,897.22	Distribution
4.2. Trevor Yopp 1127 S. 6th St. Las Vegas, NV 89104 Member/Owner	4/04/2024	\$2,897.22	Distribution

#### 5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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#### 6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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### Part 3: Legal Actions or Assignments

#### 7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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#### 8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

### Part 4: Certain Gifts and Charitable Contributions

#### 9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Debtor **Kame Turtle, LLC**

Case number (if known)

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. <b>Larson &amp; Zirzow, LLC</b> <b>850 E. Bonneville Ave.</b> <b>Las Vegas, NV 89101</b>	<b>Attorney Fees</b>	<b>12/24/24</b>	<b>\$3,125.00</b>
Email or website address <b>zlarson@lzlawnv.com</b>			
Who made the payment, if not debtor?			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Debtor **Kame Turtle, LLC**

Case number (if known) \_\_\_\_\_

**Address****Dates of occupancy  
From-To****Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

**Facility name and address****Nature of the business operation, including type of services  
the debtor provides****If debtor provides meals  
and housing, number of  
patients in debtor's care****Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☐ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☐ None

**Financial Institution name and  
Address****Last 4 digits of  
account number****Type of account or  
instrument****Date account was  
closed, sold,  
moved, or  
transferred****Last balance  
before closing or  
transfer****19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☐ None

**Depository institution name and address****Names of anyone with  
access to it  
Address****Description of the contents****Does debtor  
still have it?****20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

**Facility name and address****Names of anyone with  
access to it****Description of the contents****Does debtor  
still have it?**

Debtor **Kame Turtle, LLC**

Case number (if known)

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- ☒ No.  
☐ Yes. Provide details below.

Case title  
Case number

Court or agency name and  
address

Nature of the case

Status of case

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address

Governmental unit name and  
address

Environmental law, if known

Date of notice

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address

Governmental unit name and  
address

Environmental law, if known

Date of notice

**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Date of service  
From-To

Debtor **Kame Turtle, LLC**

Case number (if known)

Name and address		Date of service From-To
26a.1.	<b>Interactive Accountants LLC</b> <b>8180 NW 36th Street 327</b> <b>Miami, FL 33166</b>	<b>2023</b>
26a.2.	<b>CliftonLarsonAllen LLP</b> <b>Attn: Bankruptcy Dept/Managing Member</b> <b>220 S. 6th Street, Ste. 300</b> <b>Minneapolis, MN 55402</b>	<b>2022</b>
26a.3.	<b>In-Balance LLC</b> <b>2580 Anthem Village Dr., Ste. B</b> <b>Henderson, NV 89052</b>	<b>2021</b>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. <b>Elizabeth Newsome</b> <b>1127 S. 6th St.</b> <b>Las Vegas, NV 89104</b>	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

## 27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No  
☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<b>Elizabeth Newsome</b>	<b>1127 S. 6th St.</b> <b>Las Vegas, NV 89104</b>	<b>Manager</b>	<b>51%</b>
Name	Address	Position and nature of any interest	% of interest, if any
<b>Trevor Yopp</b>	<b>1127 S. 6th St.</b> <b>Las Vegas, NV 89104</b>	<b>Manager</b>	<b>24%</b>



Debtor **Kame Turtle, LLC**

Case number (if known) \_\_\_\_\_

Name	Address	Position and nature of any interest	% of interest, if any
William Beam	7440 Tobago Lane Las Vegas, NV 89123	Manager	0%
Name	Address	Position and nature of any interest	% of interest, if any
WBEAM and Associates LLC	7440 Tobago Lane Las Vegas, NV 89123	Partner	5%
Name	Address	Position and nature of any interest	% of interest, if any
FSA Holdings LLC	3018 Ashby Ave. Las Vegas, NV 89102	Partner	5%
Name	Address	Position and nature of any interest	% of interest, if any
Audrey Jayne Holt Living Trust	c/o Audrey J. Holt 541 Regents Gate Drive Henderson, NV 89012	Partner	7.5%
Name	Address	Position and nature of any interest	% of interest, if any
Karakoram LLC	434 Beautiful Hill Court Las Vegas, NV 89138	Partner	1%
Name	Address	Position and nature of any interest	% of interest, if any
Socialure, Inc.	2618 Burton Ave. Las Vegas, NV 89102	Partner	4%
Name	Address	Position and nature of any interest	% of interest, if any
Timothy J. Missenda	9096 Epworth Ave. Las Vegas, NV 89148	Partner	2.5%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No  
☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No  
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

Debtor **Kame Turtle, LLC**Case number *(if known)* \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
--------------------------	--

Debtor Kame Turtle, LLC

Case number (if known) \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 17, 2025

/s/ Elizabeth Newsome

Signature of individual signing on behalf of the debtor

Elizabeth Newsome

Printed name

Position or relationship to debtor Managing Member

**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?**

☒ No

☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court**  
**District of Nevada**

In re **Kame Turtle, LLC**

Debtor(s)

Case No.

Chapter

**7**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<b>3,125.00</b>
Prior to the filing of this statement I have received .....	\$	<b>3,125.00</b>
Balance Due .....	\$	<b>0.00</b>

2. The source of the compensation paid to me was:

☒ Debtor      ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor      ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of Debtor(s) in any adversary proceeding, including without limitation, any nondischargeability actions pursuant to 11 U.S.C. 523 and 727; and any appeals.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**January 17, 2025**

*Date*

**/s/ Zachariah Larson**

**Zachariah Larson 7787**

*Signature of Attorney*

**Larson & Zirzow, LLC**

**850 E. Bonneville Ave.**

**Las Vegas, NV 89101**

**702-382-1170 Fax: 702-382-1169**

**zlarson@lzlawnv.com**

*Name of law firm*

**United States Bankruptcy Court  
District of Nevada**

In re **Kame Turtle, LLC**

Debtor(s)

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**7**

**VERIFICATION OF CREDITOR MATRIX**

I, the Managing Member of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **January 17, 2025**

**/s/ Elizabeth Newsome**

**Elizabeth Newsome/Managing Member**

Signer/Title

Kame Turtle, LLC  
3420 Polaris Ave.  
Las Vegas, NV 89102

Internal Revenue Service  
Attn: Bankruptcy Dept/Managing Agent  
P.O. Box 7346  
Philadelphia, PA 19101

Clark County Treasurer  
c/o Bankruptcy Clerk  
500 S. Grand Central Pkwy  
P.O. Box 551220  
Las Vegas, NV 89155

Clark County Assessor  
c/o Bankruptcy Clerk  
500 S. Grand Central Pkwy  
Box 551401  
Las Vegas, NV 89155

Dept. of Empl, Training & Rehab  
Employment Security Division  
500 East Third Street  
Carson City, NV 89713

Social Security Administration  
Office of the General Counsel  
Office of Program Lit. Attn: Bankrup  
6401 Security Blvd.  
Baltimore, MD 21235

U.S. Small Business Administration  
Attn: Bankruptcy Dept/Managing Agent  
409 3rd St., SW  
Washington, DC 20416

Nevada Dept. of Taxation  
Attn: Bankruptcy Section  
700 E. Warm Spring Rd. Ste 200  
Las Vegas, NV 89119

Aliquantum International Inc.  
Attn:Bankruptcy Dept/Managing Mem  
2009 S. Parco Ave.  
Ontario, CA 91761

Archie McPhee Wholesale  
Attn:Bankruptcy Dept/Managing Member  
10915 47th Ave W  
Mukilteo, WA 98275

AREA15 Las Vegas, LLC  
Attn:Bankruptcy Dept/Managing Member  
3222 West Desert Inn Road  
Las Vegas, NV 89102

Aurora World, Inc  
Attn:Bankruptcy Dept/Managing Mem  
8820 Mercury Lane  
Pico Rivera, CA 90660

Bandai Namco Toys & Collectibles  
Attn:Bankruptcy Dept/Managing Member  
23 Odyssey  
Irvine, CA 92618

BONGIOVI Law Firm  
Attn:Bankruptcy Dept/Managing Member  
2620 Regatta Drive  
Ste 102  
Las Vegas, NV 89128

Brave Toys Pty Ltd  
Attn:Bankruptcy Dept/Managing Mem  
89- 16 Jamaica Ave  
Woodhaven, NY 11421

Capital One  
Attn: Bankruptcy Dept/Managing Agent  
P.O. Box 60519  
City of Industry, CA 91716-0519

Cardmember Service  
Attn: Bankruptcy Dept/Managing Agent  
P.O. Box 6294  
Carol Stream, IL 60197-6294

Carrera Revell Of Americas Inc.  
Attn:Bankruptcy Dept/Managing Mem  
197 New Jersey 18  
East Brunswick, NJ 08816

CenturyLink  
Attn:Bankruptcy Dept/Managing Member  
100 Centurytel Drive  
Monroe, LA 71201

Chooseco LLC  
Attn:Bankruptcy Dept/Managing Member  
340 Mad River Park  
Waitsfeild, VT 05673

CliftonLarsonAllen LLP  
Attn:Bankruptcy Dept/Managing Mem  
P.O. Box 776376  
Chicago, IL 60677-6376

Douglas Co, Inc  
Attn:Bankruptcy Dept/Managing Member  
69 Krif Road  
Box D  
Keene, NH 03431

Dreams USA Inc.  
Attn:Bankruptcy Dept/Managing Member  
2 Charles St. Ste. 3B  
Providence, RI 02904

Duncan Toys Company  
Attn:Bankruptcy Dept/Managing Mem  
Po Box 851692  
Minneapolis, MN 55485

Elizabeth Newsome  
Attn:Bankruptcy Dept/Managing Member  
1127 South 6th Street  
Las Vegas, NV 89104

Elope Inc.  
Attn:Bankruptcy Dept/Managing Member  
2080 Lookout Drive  
North Mankato, MN 56003

Enesco, LLC  
Attn:Bankruptcy Dept/Managing Mem  
500 Park Boulevard  
Ste 1300  
Itasca, IL 60143

Epoch Everlasting Play LLC  
Attn:Bankruptcy Dept/Managing Member  
330 Changebridge Road Suite 101  
Montville, NJ 07058

Fascinations, Inc.  
Attn:Bankruptcy Dept/Managing Member  
19224 Des Moines Memorial Drive  
Suite 100  
Seattle, WA 98148

Forum Shops, LLC  
The Forum Shops at Caesars III  
Attn: Management Office  
3500 Las Vegas Blvd. So.  
Las Vegas, NV 89109

Funko, LLC  
Attn:Bankruptcy Dept/Managing Member  
PO Box 677876  
Dallas, TX 75267

Guardian Life Insurance Company  
Attn: Bankruptcy Dept/Managing Agent  
7 Hanover Square  
New York, NY 10004

Hachette Book Group  
Attn:Bankruptcy Dept/Managing Mem  
PO Box 8828  
JFK Station  
Boston, MA 02114-8828

Heebie Jeebies LLC  
Attn:Bankruptcy Dept/Managing Member  
2810 N Church St  
PMB 73405  
Wilmington, DE 19802

HG Galleria, LLC  
Attn: Bankruptcy Dept/Managing Agent  
2088 Washington Street  
Indianapolis, IN 46204-3438

House of Marbles  
Attn:Bankruptcy Dept/Managing Mem  
PO Box 5814  
126 Stryker Lane, Building 24  
Hillsborough, NJ 08844

Ilana Sztaimberg  
406 Brooks Ave.  
Schertz, TX 78154

Interactive Accountants LLC  
Attn:Bankruptcy Dept/Managing Member  
8180 Northwest 36th Street  
Suite 327  
Doral, FL 33166

JPMorgan Chase Bank, N.A.  
Attn: Bankruptcy Dept/Managing Age  
P.O. Box 6026, IL1-1145  
Chicago, IL 60680-6026

Lightspeed Hardware  
Attn: Bankruptcy Dept/Managing Member  
450 Park Ave. South  
New York City, NY 10016

Little Buddy LLC  
Attn:Bankruptcy Dept/Managing Member  
7422 Orangewood Avenue  
Garden Grove, CA 92841

Loomis  
Attn:Bankruptcy Dept/Managing Mem  
Dept 0757  
P.O. Box 120001  
Dallas, TX 75312

M Health Fairview  
Attn: Bankruptcy Dept/Managing Agent  
1700 University Ave. W  
Saint Paul, MN 55104-3791

Marsello, Inc.  
Attn: Bankruptcy Dept/Managing Agent  
4 Bond St.  
Wellington, 9059  
New Zealand

Mesa Energy, Inc.  
dba EMCOR Services Nevada  
Attn: Bankruptcy Dept/Managing Mem  
6295 S. Peral Street, Ste. 1400  
Las Vegas, NV 89120

MOAC Mall Holdings LLC  
Mall of America Management Office  
2131 Lindau Lane - Suite 500  
Minneapolis, MN 55425-2640

Nicole Wong  
207 Aero Avenue  
Schertz, TX 78154

NV Energy  
Attn: Bankruptcy Dept. /Managing Ag  
PO Box 30086  
Reno, NV 89520

Pozemki, LLC  
c/o Elisabeth and Frederic Apar  
9555 Hillwood Drive  
Las Vegas, NV 89134

Redstone Foods Inc  
Attn:Bankruptcy Dept/Managing Member  
1434 Patton Place, Suite 106  
Carrollton, TX 75007

Republic Services  
Attn: Bankruptcy Dept. / Managing A  
770 E. Sahara Ave.  
Las Vegas, NV 89104-2943

Rhode Island Novelty Inc.  
Attn:Bankruptcy Dept/Managing Member  
350 Commerce Drive  
Fall River, MA 02720

Schylling Inc.  
Attn:Bankruptcy Dept/Managing Member  
PO Box 941  
C/O Berkshire Bank  
Worcester, MA 01613-0941

Shopify  
Attn: Bankruptcy/Managing Member  
151 O'Connor St. Ground Floor  
Ottawa, ON K2P 2L8  
Canada

Sierra Health Insurance  
Attn: Bankruptcy Dept/Managing Member  
P.O. Box 749542  
Los Angeles, CA 90074-9542

Simon & Schuster Inc  
Attn:Bankruptcy Dept/Managing Member  
PO Box 70660  
Chicago, IL 60673-0660

Soundtrack  
Attn: Bankruptcy Dept/Managing Mem  
800 5th Ave. N. Ste. 4100  
Seattle, WA 98109-3906

Sparkletts  
Attn: Bankruptcy Dept/Managing Member  
200 Eagles Landing Blvd.  
Lakeland, FL 33810

Spin Master Inc.  
Attn:Bankruptcy Dept/Managing Member  
300 International Drive, Suite 100  
Williamsville, NY 14221

Squire Boone Village  
Attn:Bankruptcy Dept/Managing Mem  
PO BOX 711  
New Albany, IN 47151

Stellantis Financial Services  
Attn: Bankruptcy Dept/Managing Agent  
PO Box 205749  
Dallas, TX 75320-5749

Stellantis Financial Services  
Attn: Bankruptcy Dept/Managing Agent  
3065 Akers Mill Rd., Ste. 700  
Atlanta, GA 30339

Synter Resource Group, LLC  
Attn: Bankruptcy Dept/Managing Age  
PO Box 63247  
North Charleston, SC 29419-3247

Tedco Toys  
Attn:Bankruptcy Dept/Managing Member  
498 South Washington Street  
Hagerstown, IN 47346

The Hartford  
Attn: Bankruptcy Dept/Managing Agent  
3600 Wiseman Blvd.  
San Antonio, TX 78251

tokidoki  
Attn:Bankruptcy Dept/Managing Mem  
5655 West Adams Blvd  
Los Angeles, CA 90016

Toysmith  
Attn:Bankruptcy Dept/Managing Member  
3101 WEST VALLEY HWY EAST  
SUMNER, WA 98390

Trend Enterprises Inc.  
Attn:Bankruptcy Dept/Managing Member  
Po Box 70870  
CM-9666  
Saint Paul, MN 55170-9666

Trevor Yopp  
Attn:Bankruptcy Dept/Managing Mem  
1127 South 6th Street  
Las Vegas, NV 89104

U.S. Small Business Administration  
Attn: Gil Hopenstand, Esq.  
312 N. Spring St., Fifth Floor  
Los Angeles, CA 90012

Vivint  
Attn: Bankruptcy Dept/Managing Agent  
62993 Collections Drive  
Chicago, IL 60693-0629

Weactive Inc.  
Attn:Bankruptcy Dept/Managing Mem  
21151 S Western Ave Suite 276  
Torrance, CA 90501

Wheniwork.com  
Attn: Bankruptcy Dept/Managing Agent  
420 N. 5th St., Ste. 500  
Minneapolis, MN 55401

Wild Republic  
Attn:Bankruptcy Dept/Managing Member  
7711 E Pleasant Valley Rd  
Independence, OH 44131

Winning Moves Games, Inc.  
Attn:Bankruptcy Dept/Managing Mem  
75 Sylvan Street  
Suite C-104  
Danvers, MA 01923

Worldpay Payment Resolution  
Attn: Bankruptcy Dept/Managing Agent  
P.O. Box 639726  
Cincinnati, OH 45263-9726

Mesa Energy Systems Inc.  
Attn: Bankruptcy Dept/Managing Agent  
6295 S. Pearl Street, Ste. No. 1400  
Las Vegas, NV 89120

Area 15 Las Vegas LLC  
c/o Corporation Service Co.,  
As Resident Agent  
112 N. Curry Street  
Carson City, NV 89703

Area 15 Las Vegas, LLC  
c/o Area 15 LV Mezz, LLC  
299 Park Avenue, 42nd Flr.  
New York, NY 10171

Area 15 LV Mezz LLC  
c/o Area 15 Global Developer LLC  
299 Park Avenue, 42nd Fl.  
New York, NY 10171

Forum Developers Limited Partnersh  
c/o CT Corp. System, as Resident A  
701 S. Carson Street, Ste. 200  
Carson City, NV 89701

Forum Shops LLC  
c/o The Corporation Trust Company  
Corporation Trust Center  
1209 Orange St.  
Wilmington, DE 19801

HG Galleria, LLC  
Attn: Bankruptcy Dept. / Managing Agent  
2088 Paysphere Circle  
Chicago, IL 60674

JPMorgan Chase Bank, N.A.  
Attn: Bankruptcy Dept/Managing Age  
3770 Howard Hughes Parkway, #240  
Las Vegas, NV 89169

Loomis  
Attn: Bankruptcy Dept/Managing Agent  
Dept. 0757  
P.O. Box 120757  
Dallas, TX 75312-0757

MOAC Mall Holdings LLC  
Attn: Manging Member  
238 South Ave.  
Minneapolis, MN 55425

MOAC Mall Holdings LLC  
Attn: Bankruptcy Dept/Managing Age  
NW 5826  
P.O. Box 1450  
Minneapolis, MN 55485-5826

Sierra Health  
Attn: Bankruptcy Dept/Managing Agent  
P.O. Box 18407  
Las Vegas, NV 89114-8407

Simon Property Group  
Attn: Legal Collections  
225 West Washington Street  
Indianapolis, IN 46204-3438

Simon Property Group, Inc.  
c/o The Corporation Trust Company  
Corporation Trust Center  
1209 Orange St.  
Wilmington, DE 19801



U.S. Small Business Administration  
Attn: Bankruptcy Dept/Managing Agent  
10737 Gateway West, #300  
El Paso, TX 79935

U.S. Small Business Administration  
Nevada District Office  
Attn: Joseph Amato, Director  
300 South 4th St., Suite 400  
Las Vegas, NV 89101

**United States Bankruptcy Court  
District of Nevada**

In re **Kame Turtle, LLC**

Debtor(s)

Case No.

Chapter

**7**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Kame Turtle, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

**January 17, 2025**

Date

**/s/ Zachariah Larson**

**Zachariah Larson 7787**

Signature of Attorney or Litigant

Counsel for **Kame Turtle, LLC**

**Larson & Zirzow, LLC**

**850 E. Bonneville Ave.**

**Las Vegas, NV 89101**

**702-382-1170 Fax: 702-382-1169**

**zlarson@lzlawnv.com**